## Intervention: Partner counseling and referral services

Finding: Sufficient evidence for effectiveness

Potential partners to undertake the intervention:	
Nonprofits or local coalitions	☐Businesses or labor organizations
Schools or universities	☐Media
Health care providers	
State public health departments	☐ Policymakers
Hospitals, clinics or managed care organizations	Other:

## **Background on the intervention:**

Partner Counseling and Referral Services (PCRS) is the systematic notification of sex/needle-sharing partners of HIV-positive individuals. The PCRS provider contacts individuals recently reported to the State with HIV, or re-reported as having engaged in risk behaviors (e.g., as evidenced by contracting a sexually-transmitted infection). The purposes of the contact are: (1) To refer the HIV-infected individual to appropriate medical and psycho-social services; (2) To discuss risk-reduction strategies to prevent exposing current and future partners to HIV; (3) To elicit the names of sexual and needle-sharing partners whom they may have exposed to HIV for the purpose of notification; and (5) To develop a plan for contacting partners.

The PCRS provider, the HIV-infected individual, a combination of the two contacts identified partners. When the PCRS provider makes a contact, the name of the HIV-infected individual is not shared with the notified partner. The provider offers the partner either an opportunity for onsite HIV testing or a referral for testing.

PCRS for HIV infection is confidential and depends upon the voluntary cooperation of the HIV-infected individual. PCRS has served as an important component of sexually transmitted infection (STI) control programs for many years.

## Findings from the systematic reviews:

Notification of partners who are not aware that they may have been exposed to HIV enables persons who may not have been reached through HIV prevention programs to receive a personalized risk reduction message. For example, PCRS can identify the sexual partners of intravenous drug users or the female partners of bisexual males, who may have been exposed to HIV but who may be unaware that their partner is engaging in HIV risk behaviors. With the advent of effective therapies to treat persons with HIV, identifying HIV-infected people early in the disease process is critical.

One study of over 1,000-HIV infected persons who named their sexual and needle-sharing partners determined the cost to be \$2,200 per new HIV infection identified through partner notification (Toomey KE, et al.).

Evaluations of HIV partner notification programs have found acceptance levels of 80-100 percent among notified partners offered HIV antibody testing, seropositivity rates in partners from 14 to 39 percent, and notification of partners who would not otherwise have presented for testing. In addition, these programs have demonstrated an ability to catalyze change toward

safer sexual behaviors, and cost-effectiveness has been demonstrated in a rural setting (Spencer, Hoffman, Raevsky).

## References:

CDC's Diffusion of Effective Behavioral Interventions (DEBI) - www.effectiveinterventions.org

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Toomey KE, Peterman TA, Dicker LW, Zaidi AA, Wroten JE, Carolina J. Human immunodeficiency virus partner notification. Cost and effectiveness data from an attempted randomized controlled trial. Division of STD Prevention, Centers for Disease Control and Prevention. Sex Transm Dis 1998 Jul; 25(6):310-6.

Wisconsin HIV Prevention Community Planning Council, 2005-2008 Wisconsin Comprehensive HIV Prevention Plan (2005).

Wisconsin AIDS/HIV Program. Wisconsin AIDS/HIV Program HIV prevention intervention plan and data collection and reporting forms (October 2001).